

## **DECLARATION AND POWER OF ATTORNEY**



As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## Methods and Devices for Improving Ultrasonic Measurements **Using Multiple Angle Interrogation**

the specification of which:

is attached hereto and identified as Attorney Docket No. Angle.app.us.

I hereby state that I reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s) (Country) (Number) (Day/Month/Year Filed) Priority Claimed

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States Application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

Application Serial No.

Filing Date

Status Pending

Methods and Devices for Improving Ultrasonic Measurements Using

Anatomical Landmarks

and Soft Tissue Correction

March 9, 1998

pending

Angle.app.us Mendlein and Lang I hereby appoint as my attorneys and agents with full power of substitution and revocation to prosecute my above-identified application for Letters Patent and transact all business in the Patent Office connected therewith:

John D. Mendlein

Registration Number 38,770.



I further direct that correspondence concerning this application be directed to:

John D. Mendlein, Ph.D. 680 Neptune Avenue Encinitas, CA 92024

(760)-634-3969

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity the application or any patent issued thereon.

Full name of fi	rst inventor: John D. Mendlein	
Inventor's signa	ature	Date: 5/1/98
Residence:	Encinitas, California, USA	
Citizen:	USA	
Post Office Add	ress: 680 Neptune Avenue Encinitas, CA 92024	
Full name of sec	cond inventor; Philipp Lang	
Inventor's signat	ure	Date: 52/8
Residence:	San Francisco, California, USA	
Citizen:	Germany	
Post Office Addre	ess: 225 Lincoln Way # 206 San Francisco, CA 94122	

Angle.app.us Mendlein and Lang



PTO/SB/81 (10-00)

Approved for use through 10/31/2002 CMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEFARTMENT OF CONNERCE

Under the Paperwark Reduction Act of 1995, no persons are required to respond to a collection of information unless it deplay a valid ONB control number.

## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	09/071,854
Filing Date	5/2/1998
First Named Inventor	Mendlein
Group Art Unit	3737
Examiner Name	Jaworksi
Attorney Docket Number	Angle.app us

				The state of the s	
I hereby app	ooint:				
✓ Practiti	oners at Customer Number	23483	7	Place Customers	
OR				Label here	
Practition	oner(s) named below:				
Name 2848 Registration Number					
	PATENT TRADEMARK OFFICE				
as my/our atto business in th	emey(s) or agent(s) to prosect a United States Patent and Tr	ute the application id rademark Office con	lentified above, and nected therewith.	to transact all	
Please change	the correspondence address	for the above-identif	fied application to:		
ine above	e-mentioned Customer Number	er.			
OR					
Firm or Individual N	lama				
Address				· · · · · · · · · · · · · · · · · · ·	
Address		<del></del>			
City		ē	tate	Zip	
Country					
Telephone		F	ax		
l am the:					
Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name	John Mendlein, Ph.D.	policalit of Adaightes	O Record		
	11		*		
Signature			·		
Date	JUNE JUNE	€ 27 200			
110101.41					
NOTE: Signatures of all forms if more than one	il the inventors or assignees of recor signature is required, see below".	d of the entire interest or	<b>their representative(s)</b> a	are required. Submit multiple	

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the neces of the individual case. Any comments on the amount of time you are required to complete this form should be stort to the Chief Information Officer, U.S. Estern and Trademark Office. Washington, OC 20021 TY NAT REND CEEC OR CAMER FEED CARRY THE ANTIPECC CENTER AND ACCURATE THE COMMENT OF THE ANTIPECC CENTER AND ACCURATE THE ACCURATE THE



COPY

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Applicati n Number	09/071,854
Filing Date	05/02/98
First Named Inventor	Mendlein
Group Art Unit	3737
Examiner Name	Jaworski, F.
Attorney Docket Number	Angle.App.US (112959-120)

I hereby appoint:			ļ		
Practitioners OR	s at Customer Number	23483	]	Number Bar Code La <b>23483</b>	
	s) named below:			PATERT TRACEMARK OFFICE	
	Name	(i)	Registra	ation Number	
	·			<del></del>	1 . 1
					1 .
					1 1
<b>L</b>					
as my/our attorney	y(s) or agent(s) to prosect	ute the application id	lentified above	, and to transact all	1
business in the Ur	nited States Patent and T	rademark Office Con	meded merew	iui.	
			:Cad application	. <b>t</b> o:	į
Please change the	correspondence addressentioned Customer Numb	s for the above-identi	med application	110:	
	antioned Castomer Numb	ci.			i
OR ·	<del></del>				
Firm or Individual Name	e				
Address				<u></u>	
Address				TT	
City			State	Zip	
Country			Fax .		
Telephone			rax		
I am the:					
Applicant/l	nventor.		· ·		
Assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name					<u> </u>
		1.			
Signature					
Date January 31, 2002  NOTE: Signatures of all the inventors or assignees of record of the ntire interest or their representative(s) are required. Submit multiple					
forms if more than one signature is required, see below.".					
Total of forms are submitted.					